## FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FO	RM	D

140	390	635	_
OME	APPRO	DVAL	
OMB Num	ber:	3235-0076	
Expires:	June	30,2008	
Estimated	averag	e burden	
hours per	respons	ie16.00	

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					

Washington, D.C. 20549  FORM D  NOTICE OF SALE OF SECURITIE  PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEM  Name of Orlering ( check if this is an amendment and name has changed, and indicate change.)	Prefix Serial  DATE RECEIVED							
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)								
Class B Common Stock in Merger  Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)  Type of Filing: New Filing Amendment	) 🗆 uloe							
A. BASIC IDENTIFICATION DATA								
1. Enter the information requested about the issuer	08053421							
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Fountainhead Estate Holding Corp.								
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)							
503 Imperial Road North, Guelph, Ontario, Canada N1H6T9	519-827-1999							
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)							
same	same SE6							
Brief Description of Business	Wall Processing							
Technology services and products	Section							
Type of Business Organization  corporation limited partnership, already formed business trust limited partnership, to be formed	please specify): JUL 7 2008							
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State								
CN for Canada; FN for other foreign jurisdiction)								

### GENERAL INSTRUCTIONS

# Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Hastings, Ted Business or Residence Address (Number and Street, City, State, Zip Code) 503 Imperial Road North, Guelph, Ontario, Canada N1H6T9 Executive Officer General and/or Check Box(es) that Apply: Promoter □ Beneficial Owner ✓ Director Managing Partner Full Name (Last name first, if individual) Nussey, Brandon Business or Residence Address (Number and Street, City, State, Zip Code) 503 Imperial Road North, Guelph, Ontario, Canada N1H6T9 Z Executive Officer General and/or Beneficial Owner Director Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) Filsinger, Paul Business or Residence Address (Number and Street, City, State, Zip Code) 503 Imperial Road North, Guelph, Ontario, Canada N1H6T9 Check Box(es) that Apply: ☐ Beneficial Owner Executive Officer General and/or ☐ Promoter Director Managing Partner Full Name (Last name first, if individual) Arnone, Miles Business or Residence Address (Number and Street, City, State, Zip Code) 2 Bethesda Metro Center, 14th Floor, Bethesda, Maryland 20814 Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or ☐ Promoter ☐ Director Managing Partner Full Name (Last name first, if individual) American Capital Strategies Ltd. Business or Residence Address (Number and Street, City, State, Zip Code) 2 Bethesda Metro Center, 14th Floor, Bethesda, Maryland 20814 Check Box(es) that Apply: □ Promoter General and/or Director Managing Partner Full Name (Last name first, if individual) American Capital Equity 1 LLC Business or Residence Address (Number and Street, City, State, Zip Code) 2 Bethesda Metro Center, 14th Floor, Bethesda, Maryland 20814 Check Box(es) that Apply: □ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

			<del></del>		В. 1	NFORMAT	ION ABOU	T OFFERI	NG				
,	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes	No 🔀				
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this othering?  Answer also in Appendix, Column 2, if filing under ULOE.												
2.								<b>s</b> _20,	00.00				
_,												Yes	No
3.		_	permit join										K
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful N/		Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	Zip Code)						
Nar	me of As	sociated Bi	roker or De	aler									
Sta	tes in Wi	nich Persor	Listed Ha	Solicited	or Intends	to Solicit	Purchasers	_					
	(Check	"All State:	s" or check	individual	States)		••••••		***************************************	***************************************	*****************	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if ind	vidual)		··-·							
Bus	siness or	Residence	: Address (1	Number an	d Street, C	ity, State,	Zip Code)	<u>.</u>					
_													
Nar	ne of As:	sociated Bi	roker or De	aler									
Stat	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						· · · · ·
	(Check	"All States	or check	individual	States)			••••••			•••••	☐ All	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (	Last name	first, if indi	vidual)	•	•		•••					
Bus	iness or	Residence	Address (?	Number an	d Street, C	Sity, State, 2	Zip Code)					_	
Negro of Associated Bashas or Bashas													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)							States						
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box  and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	ζ		
	Type of Security	Aggregate Offering Price	:e	Amount Already Sold
	Debt	s 0.00		s 0.00
	Equity	\$ 183,505.00	)	\$ 183,505.00
	Common Preferred		_	
	Convertible Securities (including warrants)	s 0.00		0.00 \$
	Partnership Interests			\$ 0.00
	Other (Specify)		_	\$ 0.00
	Total	100 505 0	)	s 183,505.00
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	e r		Aggregale
		Number Investors		Dollar Amount of Purchases
	Accredited Investors		_	\$ 183,505.00
	Non-accredited Investors			\$_0.00
	Total (for filings under Rule 504 only)	0	—	\$_0.00
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	:		
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	•		\$
	Regulation A		_	\$
	Rule 504		_	\$
	Total			\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	• •	_	
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$ 0.00
	Legal Fees		$\overline{Z}$	\$ 25,000.00
	Accounting Fees			\$_0.00
	Engineering Fees			\$_0.00
	Sales Commissions (specify finders' fees separately)			\$_0.00
	Other Expenses (identify)			\$_0.00
	Total		$\overline{\Box}$	s 25,000.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."		SS	158,505.00
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate an f the payments listed must equal the adjusted gro	d	
			Payments to	
			Officers,	_
			Directors, & Affiliates	Payments to Others
	Salaries and fees			□ \$ 0.00
	Purchase of real estate		<del></del>	S 0.00
			\$ <u></u>	
	Purchase, rental or leasing and installation of manand equipment		∏\$ 0.00	\$_0.00
	Construction or leasing of plant buildings and fac			s 0.00
	Acquisition of other businesses (including the va			
	offering that may be used in exchange for the ass	ets or securities of another	m c 0 00	T\$ 158,505.00
	issuer pursuant to a merger)			. 🖵 ——
	Repayment of indebtedness			\$ 0.00
	Working capital			\$ 0.00
	Other (specify):		\$ <u></u>	. \$_0.00
			\$ <u></u>	\$_0.00
	Column Totals			<u>\$ 158,505.00</u>
	Total Payments Listed (column totals added)		[] \$_1	58,505.00
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Comm	iisslon, upon writte	
lss	uer (Print or Type)	Signature 7	Date	
Fo	untainhead Estate Holding Corp.	Ky Wan	June 26, 2008	
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
	ndon Nussey	Chief Financial Officer		
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